	GN FINANCE R TE OF WISCONS	· ·	September 1 Septem	¥5 (6°36°1(
Is This Report an Amendment: Yes	□ No	:	MILWAUN	IEE COI	JNTY		
Instructions for completing schedules are on the back of each schedule.				COMM	SSION		
COMMITTEE IDENTIFICATION			2011 JUL	18 A	II: 0 2		
Name of Committee Lifizens for Joe Lzarnezki Street Address				RECEIVED			
7004 West Van Beck City, State and Zip Code	·						
Milwaukee, WI 532.	3. 0	······································	WSEB ID Number:				
Please check if address is different than previously reported,	and complete the Camp	aign Registration Sta	itement in the	back of t	his form. 🔲		
NAME OF REPORT							
January Continuing Pre-Primary Spring Fall Spe				ecial			
☐ July Continuing 2011 Pre-Election	Spring [Fall Spec	cial Termination Report				
SUMMARY OF RECEIPTS AND DISBURSEMENTS 1. RECEIPTS	Column A This Period	Column B Calendar Year-To-Date		Audited Office U			
1A. Contributions (Including Loans) from Individuals	\$ 225,00	\$ 225,00	s 3225	i (2)	s 335.00		
1B. Contributions from Committees (Transfers-In)	\$ 00.00	\$ 00.00	s ε	-00	\$ 6.00		
1C. Other Income and Commercial Loans	\$ 00.00	\$ 00.00			\$ 0.00		
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C) 2. DISBURSEMENTS	\$ 225.00	\$ 225.00	1		s 02500		
	\$ ha ob		Te				
2A. Gross Expenditures		\$ 00.00	 •		\$		
2B. Contributions to Committees (Transfers-Out)	\$ 60.00	\$ 00.00	<u> </u>		3		
TOTAL DISBURSEMENTS (Add totals from 2A and 2B) CASH SUMMARY	\$ 50.00	\$ 00.00	<u> </u>		\$		
				10 m	5 4		
Cash Balance Beginning of Report	\$ 8,981.02			_ ^			
Total Receipts	\$ 225,00		 -	<u>\$</u>			
Subtotal	\$9206.02	1	r	•	76.02		
Total Disbursements	\$ 60.00		-	\$			
CASH BALANCE END OF REPORT	\$ 9,206.02	-	_	S 4 20			
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$ 00.00			S ·	and the second s		
LOANS (Balance at the Close of This Period-3B)			*				
I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.							
	ignature of Candidate or Tro			7/3/11	and the state of 		
Mary Ang Czarneski	march Co						

The information on this form is required by ss.11.06, 11.20, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page ____ of ____

Complete Committee Name	for	Joe	Czari	rezk.	
Instructions for completing	schedu	les are on th	e back of each s	schedule.	

	Amount	Calendar Year-to-Date Total
16 111 John Norquist 6707 N. Newgard		4/00,00
Chilago, IL bold	# 100:00	Office Use
Check if: Clin-Kind Conduit Cloan Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place		
Of Employment (if year-to-date total exceeds \$100)		Calendar Year-to-Date Total
25111 George Christenson #3 2006 W. Oklahoma Ave		\$100.00
West All.s. WI 53219	\$100,00	Office Use
Check if: In-Kind Conduit Coan Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place		
Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
19 111 Janie Czarnozei 700 4 W. Van Beck AUC		925,00
M: / Wank Le WI 53220	135.00	Office Use
Check if: 3 In-Kind Conduit Loan		
Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place	Amount	Calendar You to Data Tatal
Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
		Office Use
Check if: [] In-Kind [] Conduit [] Loan		
Date Full Name, Mailing Address and Zip Code ; Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1		1 307 10 0010 7010
		Office Use
Check if: In-Kind Conduit Loan		
Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Tota
		Office Use
Check if: [] In-Kind [] Conduit [] Loan		
Date Full Name, Mailing Address and Zip Code ; Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Tota
Of Employment (if year-to-date total exceeds \$100)		i set-ro-nate 108
		Office Use
Check if: In-Kind Conduit Loan		
Date Full Name, Mailing Address and Zip Code Occupation, Name and Address of Principal Place	Amount	Calendar Year-to-Date Tota
Of Employment fil year-trudate total exposure \$1000		
Of Employment (if year-to-date total exceeds \$100)	i .	,
	And described to the second se	Office Use
		Office Use
	\$ 225,00	225.02
Check if: [] In-Kind [] Conduit [] Loan		
Check if: [] In-Kind [] Conduit [] Loan SUBTOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	s 3 225,00	225,00

SCHEDULE 3-B

ADDITIONAL DISCLOSURE

Loans

Individual, Committee or Commercial

	·····					
Complete Committee Name	2.5	,	J.			
Professor	and the same	100	I was in			
L17125575	1 6 0	amond O Carres	- Carrie Lie Char	1 11 6 2	2. 17 1	

Instructions to	r completing schedules are on						
	Full Name, Mailing Address and Zip Code of Loan Source Mary Ann Czarnezk, 7004 W. Van Beck Auc- Milwanker, W153220 ers or Guarantors (if any)		Outstanding Balance Beginning of This Period	New Loans This Period	Cumula Payme This Pe	nts	Outstanding Balance End of This Period
Date	LINE Y ITTHE LINE Z. Q.	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
8 129108	Milwantes L	BECK AVE UI 532LO	\$ 3,000.00	-			\$ 3,000,00
List All Endorse	rs or Guarantors (if any)			,			
Full Name, Mai of Guarantor	ling Address and Zip Code	Occupation					
		Name and Address of Employer					
		Amount Guaranteed Outstanding	ngy g angalahanan (hin gy yer agagaga medalan (da amanan magapa m	a-est-carbonalis appears o interprepaya compaya appearance appearance			
Full Name, Mai of Guarantor	ling Address and Zip Code	Occupation					
		Name and Address of Employer					
		Amount Guaranteed Outstanding					
	Full Name, Mailing Address and	·	Outstanding Balance Beginning of This Period	New Loans This Period	Cumul Paym This P	ents	Outstanding Balance End of This Period
Date	7004 W. Van	Beck AVE	\$ 3000 ce				\$3,000.00
	Milwautes, Wars or Guarantors (if any)		<u> </u>	***************************************	· · · · · · · · · · · · · · · · · · ·		
Full Name, Ma of Guarantor	iling Address and Zip Code	Occupation					
		Name and Address of Employer					
	•	Amount Guaranteed Outstanding					
	iling Address and Zip Code	Occupation		******			
of Guarantor		Name and Address of Employer					
THE RESIDENCE OF THE PERSON OF		Amount Guaranteed Outstanding					
		s					
	Full Name, Mailing Address and		Outstanding Balance Beginning of This Period	New Loans This Period	Payn	lative nents Period	Outstanding Balance End of This Period
Date / /							
List All Endors	ers or Guarantors (if any)	11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			<u></u>		
Full Name, Ma of Guarantor	illing Address and Zip Code	Occupation		**************************************	and the state of t		
		Name and Address of Employer		videlan angrana ani anasanani manya di darinda sanandi			
		Amount Guaranteed Outstanding	rhill die der der verweren des eres eine er er eres der der der verweren er e	روان افران شوا مداه داده مورون مساور او بروان به بروان و بروان می درون میارد و ساز می داده است.			
Full Name, Ma of Guarantor	ailing Address and Zip Code	Occupation	harden geding versus participation acceptance of the description of th				
		Name and Address of Employer	gargarilga da dhijishingan dafi darilaa kan yaalinda kalif karnda dagii kan karda gaa engi dak		riskramakosanskriskriskriskriskriskriskris	1	
		Amount Guaranteed Outstanding				1	
	de l'al referent per contrat de cuertaine de l'action de l'action que que que par la collège en contrat au par	S	ati wilay ing mangangan ang mangangan ang mangangan ang mangangan ang mangangan ang mangangan ang mangangan an		Children in the state of the st		

SUBTOTAL OUTSTANDING LOANS THIS PAGE \$ 4,000.00

TOTAL OUTSTANDING LOANS 8 4,000.00

Page _____ of _____